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Approved for use through 09/30/2000. ONE 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

| | |
|--|----------------------------------|
| Attorney Docket No. | EFIM0203 |
| First Inventor or Application Identifier | Tosaya |
| Title | Piezoelectric Data Entry Devices |
| Express Mail Label No. | EL816158969US |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- ☒ Specification [Total Pages 41]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 22]
- Oath or Declaration [Total Pages 2]
 - ☒ Newly executed (original or copy)
 - ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

| | | | |
|---|-------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Continuation | <input type="checkbox"/> Divisional | <input checked="" type="checkbox"/> Continuation-in-part (CIP) | of prior application No. 09 / 177,429 |
| Prior application information: Examiner Unknown | | Group / Art Unit: Unknown | |

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

| | | | |
|---|-----------|----------|---|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 22862 | or | <input type="checkbox"/> Correspondence address below |
| (Insert Customer No. or Attach bar code label here) | | | |
| Name | | | |
| Address | | | |
| City | State | Zip Code | |
| Country | Telephone | Fax | |

| | | | |
|-------------------|------------------|-----------------------------------|--------|
| Name (Print/Type) | Michael A. Glenn | Registration No. (Attorney/Agent) | 30,176 |
| Signature | | Date | 5/4/01 |

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 1999

Patent fees are subject to annual revision
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid See Forms PTO/SB/09-12
See 37 C.F.R. §§ 1.27 and 1.28

TOTAL AMOUNT OF PAYMENT (\$) 840.00

Complete if Known

| | |
|----------------------|------------|
| Application Number | Unassigned |
| Filing Date | Herewith |
| First Named Inventor | Tosaya |
| Examiner Name | Unassigned |
| Group / Art Unit | Unassigned |
| Attorney Docket No. | EFIM0203 |

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to

Deposit Account Number 05-0770

Deposit Account Name Electronics for Imaging

- ☒ Charge Any Additional Fee Required
Under 37 C.F.R. §§ 1.16 and 1.17

2. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|---------------|---------------|-------------------------|----------|
| 101 | 760 | 201 | 380 | Utility filing fee | 710.00 |
| 106 | 310 | 206 | 155 | Design filing fee | |
| 107 | 480 | 207 | 240 | Plant filing fee | |
| 108 | 760 | 208 | 380 | Resubmission filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$) 710.00

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 25 | 5 | 18.00 | 90.00 |
| 3 | 0 | 80.00 | 0.00 |
| Multiple Dependent | | | |

*or number previously paid, if greater; For Resubmissions, see below

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|---------------|---------------|---|----------|
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 78 | 202 | 39 | Independent claims in excess of 3 | |
| 104 | 260 | 204 | 130 | Multiple dependent claim, if not paid | |
| 109 | 78 | 209 | 39 | ** Resubmission independent claims over original patent | |
| 110 | 18 | 210 | 9 | ** Resubmission claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$) 90.00

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|---------------------------|--------------|---------------|---------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 380 | 216 | 190 | Extension for reply within second month | |
| 117 | 870 | 217 | 435 | Extension for reply within third month | |
| 118 | 1,360 | 218 | 680 | Extension for reply within fourth month | |
| 128 | 1,850 | 228 | 925 | Extension for reply within fifth month | |
| 119 | 300 | 219 | 150 | Notice of Appeal | |
| 120 | 300 | 220 | 150 | Filing a brief in support of an appeal | |
| 121 | 260 | 221 | 130 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,210 | 241 | 605 | Petition to revive - unintentional | |
| 142 | 1,210 | 242 | 605 | Utility issue fee (or resubmission) | |
| 143 | 430 | 243 | 215 | Design issue fee | |
| 144 | 580 | 244 | 290 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Sheet | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 |
| 146 | 760 | 246 | 380 | Filing a submission after final rejection (37 C.F.R. § 1.129(a)) | |
| 149 | 760 | 249 | 380 | For each additional invention to be examined (37 C.F.R. § 1.129(b)) | |
| Other fee (specify) _____ | | | | | |
| Other fee (specify) _____ | | | | | |

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 40.00

SUBMITTED BY

| | | | | | |
|-------------------|------------------|----------------------------------|--------|--------------------------|-----------|
| Name (Print Type) | Michael A. Glenn | Registration No (Attorney/Agent) | 30,176 | Complete (if applicable) | Telephone |
| Signature | | | | Date | 5/4/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231